

SCHEDULE A

ITEMIZED RECEIPTS

Any information supplied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
 Friends of Phill dba Kline for Congress

A. Full Name, Mailing Address and Zip Code Karen Rowe 6014 Summit Shawnee Mission, KS 66215- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Self-employed	Date (month, day, year) 05/22/2000	Amount of Each Receipt this Period \$300.00
	Occupation Nikken Distributor	Aggregate Year-to-Date -> \$300.00	
B. Full Name, Mailing Address and Zip Code Michael J. Sanders P.O. Box 15502 Shawnee Mission, KS 66285- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Carlisle Corp.	Date (month, day, year) 05/05/2000	Amount of Each Receipt this Period \$300.00
	Occupation Controller	Aggregate Year-to-Date -> \$300.00	
C. Full Name, Mailing Address and Zip Code Patrick W. Shelley 9523 W 116th Pl Shawnee Mission, KS 66210- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Teague Electric	Date (month, day, year) 06/20/2000	Amount of Each Receipt this Period \$500.00
	Occupation Executive	Aggregate Year-to-Date -> \$500.00	
D. Full Name, Mailing Address and Zip Code Rick Shepard 8809 W 115th Terr Shawnee Mission, KS 66210- Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Medimmune	Date (month, day, year) 06/22/2000	Amount of Each Receipt this Period \$250.00
	Occupation Pharmaceutical Sales	Aggregate Year-to-Date -> \$250.00	
E. Full Name, Mailing Address and Zip Code Rick Shepard 8809 W 115th Terr Shawnee Mission, KS 66210- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Medimmune	Date (month, day, year) 06/22/2000	Amount of Each Receipt this Period \$750.00
	Occupation Pharmaceutical Sales	Aggregate Year-to-Date -> \$1000.00	
F. Full Name, Mailing Address and Zip Code Sheryl K. Shockey 10700 W 101st St Shawnee Mission, KS 66214- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer	Date (month, day, year) 06/16/2000	Amount of Each Receipt this Period \$1000.00
	Occupation Homemaker	Aggregate Year-to-Date -> \$1000.00	
G. Full Name, Mailing Address and Zip Code Charles E. Shockey III 10700 W 101st St Shawnee Mission, KS 66214- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Software & Engineering Cons.	Date (month, day, year) 05/12/2000	Amount of Each Receipt this Period \$400.00
	Occupation Executive	Aggregate Year-to-Date -> \$400.00	

SUBTOTAL of Receipts This Page (optional)	\$3500.00
TOTAL This Period (last page this line number only)	